# THE ACCREDITATION PROCESS

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# **Appendix**

Memorandum of Understanding Standard Compliance Form Waiver Form

### I. INITIAL STEPS

**CEO makes decision to pursue accredited status.** The decision by the CEO to go forward with accreditation can be based on many factors. What is most important is that the CEO is aware of the complexity of the task and that he/she is going to be supportive of the accreditation manager. Without the CEO making it clear to all members of the organization that accreditation is a priority, it will be extremely difficult for the accreditation manager to get the job done. The CEO should visit the Commission web site at: dcjs.state.va.us/accred

**CEO designates the accreditation manager**. There are several factors to consider when choosing an accreditation manager. The CEO should appoint an individual who has demonstrated:

- an interest is doing the job
- computer literacy
- organization and efficiency in their present job tasks
- capability in writing clearly and concisely
- capability in formulating drafts of agency policy statements
- capability in dealing effectively with all levels of agency management, and,
- a willingness to work the long hours that accreditation activities demand.

The accreditation manager should be someone who is innovative and not locked into a mindset that does not allow for much change. Accreditation WILL change the agency and the accreditation manager is a key change agent. The CEO should also be mindful that accreditation is a task in which the entire agency participates. Managers will have a very difficult time if expected to accomplish this task by themselves. The CEO and command staff will need to participate in the process regularly, and the CEO will need to remain the "head cheerleader" for the effort.

**Presentation by VLEPSC staff to agency command staff.** This service of the Commission is offered to allow the CEO to invite a Commission staff person to provide a 30-45 minute presentation on the VLEPSC program to invited personnel. A staff person will travel to the agency and present the program, usually at the regular agency staff meeting. Taking advantage of this free service allows for the agency command to ask questions and to get a clear and concise view of what accredited status will mean to the department. Although this service is not a mandatory step, it is encouraged. To arrange for a presentation, simply call or e-mail the Commission.

Complete and submit the *Memorandum of Understanding*. The Memorandum of Understanding (MOU) is a document that is designed to inform the agency, the jurisdiction and the Commission of their respective roles in the VLEPSC process. It is a non-binding mutual agreement. By signing this document, the agency agrees to actively pursue accredited status in good faith. The jurisdiction agrees to be supportive of the agency. The Commission promises to provide resources and an organizational structure that will facilitate the process as much as possible. Nothing in the document addresses financial support. Once signed by the CEO and a jurisdictional representative it should be sent to the Commission. At the next executive board meeting, the Chairman or his/her representative will sign the agreement and a copy will be forwarded to the agency accreditation manager. This form is found in section IX. of this manual or can be downloaded from the DCJS web site.

**Memo from the CEO to agency personnel.** This is an often overlooked, but very important step in the accreditation process. The CEO should advise all agency personnel what is going to take place regarding accreditation. The memo should indicate the importance of the process, the positive effect it will have on the department, and, very importantly, the authority of the accreditation manager when dealing with accreditation issues and timelines. The memo should be read at roll calls or posted where personnel can read it.

**Designation of clerical support**. Accreditation is information intensive. The creation and dissemination of information regarding agency policy lies at the heart of the process. The level of clerical support for the accreditation manager is dependent on his/her own clerical and organizational ability and the resources available within the organization. Many managers rely on secretarial assistance while others prefer to produce their own documents and provide a personal approach to clerical duties.

**Schedule briefings.** The role of accreditation manager includes the important component of information officer. When beginning the process, the manager should arrange with the CEO for regular briefings on accreditation activities. The CEO may also want to schedule time at regular command staff meeting for the manager to bring staff personnel up to date on progress and to address problem areas. Some agencies also use the staff briefings to formalize the process of assigning agency command staff policy review areas and other duties designed to assist the manager.

Visiting other agencies. The new accreditation manager should make contact with other agencies involved in accreditation. Establishing and maintaining relationships with agencies and their accreditation managers will greatly assist the new manager in developing policies and procedures based on the standards. There is a respected technique in accreditation that allows managers to beg, borrow and steal from other agencies policy statements and other documents as often as possible! The fact is most law enforcement policy is generic. A policy on use of force in Chesapeake is very likely similar to that found in Bristol or Winchester. Accreditation managers can develop much of what they need based on the work done by others. By visiting other departments that are involved in accreditation, the new manager can also get feedback on his/her policy drafts, develop strategies to address snags they may encounter, and weigh different methods of administering the program in their own agency. One suggested method of supplying information is the regional committee format. Several agencies from the same geographic region of the state may want to form a work group that meets regularly. This process is highly recommended, and if one is active in the area, it can prove very helpful.

The accreditation manager attends training. The VLEPSC staff offers training classes. However, the new accreditation manager, especially when not familiar with accreditation, should begin their own education by visiting other agencies (see no. 9 above) and studying the standards. Involvement with the Virginia Law Enforcement Accreditation Coalition (VALEAC) is imperative. VALEAC is the association of Virginia accreditation managers whose agencies are pursuing state accreditation. This group meets regularly and is a large network of information on all accreditation activities and methods of complying with the standards. The agency is well advised to join this group. Annual fees are minimal, and training is offered at every meeting. VALEAC also maintains the single most important web site for accreditation managers. This web page, a Yahoo!.com group, allows managers to post questions they may need help with, review any new standards or pending legislation that may affect their work, or simply find the phone number of a colleague. Contact Commission staff for more information on VALEAC and for an invitation to join this free site.

#### II. ORGANIZATION

**Obtain necessary supplies.** There is no single way for an accreditation manager to do the job, and supplies are dependent on the manager's organizational skills. Access to the Internet is a near-necessity. However, the information you need can also be obtained by traditional means. A new manager will need the usual office paraphernalia, but will also need a computer work station and some specialized supplies. Agencies (and their managers) have been innovative in designing their files and color-coding seems to be the easiest and most accepted method of identification. Instead of using all buff colored folders, you may want to purchase color folders (red for Administration, blue for Operations, etc.) A file cabinet that is designated only for accreditation files is important. Your agency will be keeping files for many years, and the new manager will need the file space. Accreditation files must be tab labeled and most managers use highlighters to accent relevant portions of the enclosed documentation. Once you have your files created, you are ready to get started on filling the folders.

**Print out standards.** The VLEPSC standards can be found on the Internet at <a href="https://www.dcjs.state.va.us/accred">www.dcjs.state.va.us/accred</a> or by visiting the VALEAC web page. From these sites, simply follow the instructions for access to all standards, forms, by-laws and procedures. Copy the standards to your choice of mediums, and separate them individually.

**Prepare the file folders.** The file folders are the main focus for an accreditation manager. The manager will spend many hours filling the folders, checking them, re-filling and re-checking the contents. It is important that the folders be set up with one goal: make it as easy as possible for the assessors to read, understand, agree that your agency is in compliance with the standard and close the folder! To this end, the folder should be "user friendly" and constructed in such a way that all four of the proof components are addressed. A typical accreditation folder includes:

- a label with the standard number clearly typed,
- a printed or typed copy of the standard being addressed by this folder secured to the left inside of the cover.
- a completed Standard Compliance Form (SCF.) This form is addressed below.
- those items that can prove that the agency is actually doing what the standard addresses and
  agency directives demand. These are the proofs of compliance and are the lifeblood of the files.
  They should be organized in a manner that directs the assessors quickly and effectively to the
  information needed.

There are several helpful hints to preparing an accreditation file, but some are best to know when first getting started. For instance, always identify the items inside the folder as belonging to that folder only. This can be accomplished by placing the standard number for every proof of compliance at a consistent location on all items. This will help identify loose papers, especially if a pile of folders accidentally is knocked to the floor! Many managers use a separation sheet for each proof for bulleted items. The proofs of compliance are arranged so that the assessor can read the standard statement and immediately tab to bullet "a" "b" or "c" as desired. Whichever technique the manager uses, the goals mentioned above remain the same. Just as the accreditation program tells the agency WHAT they must do, but not HOW it must be done, the folders must contain certain items, but how the information is presented is only constrained by the imagination and innovation of the accreditation manager.

The Standard Compliance Form (SCF) is the table of contents for the folder. A sample copy of a SCF can be found in section IX. of this document. The form requires the usual identification information and then gives the AM four areas where proofs of compliance can be listed. A comprehensive explanation of these areas is found in section III. of this document.

**Schedule briefings for rank and file personnel.** The manager should arrange with agency line supervisors for time at roll calls to brief personnel on progress toward accredited status. Don't forget the communications staff, record clerks, clerical staff, civilian personnel and others who are effected by this effort.

## III. MANAGING AND PROVING COMPLIANCE WITH STANDARDS

**Create a tracking system.** The accreditation manager will need to create a tracking system that will provide quick reference to the status of each folder. Some managers use a large white board, others an *Excel* spreadsheet on their computer. Make this as convenient and easy for you as possible. A status board makes it easy for the CEO and other interested parties to visualize agency progress.

**Begin self-assessment.** Now the real work begins. Self -assessment simply translates as an exercise in comparison. Once the filing system is organized, the manager starts comparing current agency policy to the accreditation standards. Most managers quickly come to the conclusion that the agency is closer to compliance than anticipated. Law enforcement adapts to the ebb and flow of legislative changes and agencies adopt policy that is consistent with the law. As the accreditation manager compares what must be covered for accreditation purposes, he/she will probably find that some fine-tuning is necessary. One of the

biggest mistakes committed by new accreditation managers is in rushing the job. There are no time limitations in the VLEPSC process. The manager may want to address high liability areas first in order to get any necessary changes in agency policy into the hands of those it effects as quickly as possible. Use of force, pursuit driving, property and evidence control, arrest procedures, etc. are some of these high liability areas. When comparing agency policy to the standards, the manager will need to be mindful of cross-compliance and reference. For instance, when comparing agency policy on use of force, are roadblocks addressed? Is there separate policy on this (or any) one element? If so, the manager will need the separate policy in the compliance folder, or may opt to submit a draft combining the two! Self-assessment provides the agency with the opportunity to do a through audit of how they do business. A second, and very important, mistake made by new AM's is in trying to do this alone. It is very seldom that we find personnel that have a complete knowledge of all aspects of law enforcement management. The AM must have an arrangement with the CEO, command staff, and, in fact, all components of the organization that allows him/her to ask the appropriate person to review standard compliance for specific standards. If you have never worked in communications, it is doubtful that you would know all the nuances of that area. Use your people resources!

**Compile supportive documentation.** Accreditation managers are not bound by conventional wisdom when it comes to proving compliance to standards. There are several ways to prove compliance on just about every standard. The Standard Compliance Form (SCF) designates four types of proofs of compliance: written directives, other documentation, interviews and observation. There are no requirements as to how many proofs you will need in each area.

<u>Written directives</u> are anything that directs a particular action is required of personnel. Examples of written documents include, but are not limited to general orders, procedure manuals, lesson plans, memos, state code sections, or jurisdictional policies and law. Agency policy is usually considered a written directive, and will most often be the first item the manager has available to prove compliance, but quite possibly not the only written directive. The following is example of how this may look on the SCF for a Use of Force Training standard:

### **Written Directives**

- 1. Agency Policy 05-01 Use of Force
- 2.
- 3.
- 4.

Other documentation may include photographs, videos, log sheets, agency forms, training rosters, evidence bags, or a number of other items. The key element in this category is that the proof does not require a specific action be taken, but is an instrument of the person taking the action.

## **Other Documentation**

- 1. Training logs from firing range
- 2. Photo of officers training from local newspaper
- 3. Incident report dated 2-12-03 involving application of force

<u>Interviews</u> are frequently conducted by the assessment team. The manager may want to list individuals on the SCF who are most knowledgeable about the agency action in a specific arena. For example, the director of personnel for the jurisdiction may be listed as a potential interview to prove compliance with certain personnel standards. The lead dispatcher may be listed as the best source of information on dispatch responsibilities during high-speed pursuits. Listing the names of individuals does not insure that the assessment team will interview the person. However, if the team does choose to interview the suggested person, the manager has already supplied them with the name (and proper spelling) of the interviewee. This makes the assessors job easier, and that makes the assessment go faster.

### **Interviews**

- 1. Sgt. James A. Johnson (Range Officer)
- 2.
- 3.
- 4.

Observation is the fourth and final category on the SCF. This type of proof is the easiest for the assessor, and probably the least utilized. There are several standards where simply observing an action or a piece of equipment is proof that the agency is in compliance with the standard. Standards addressing markings on agency vehicles, alternate sources of power for communications equipment, or instructions for citizen complaints are examples of observation compliance. How would this look on a SCF?

#### Observation

- 1. Visit to firing range during training session (Monday afternoon)
- 2.
- 3.
- 4.

Accreditation managers should also be aware that the best assessors wouldn't settle for a single proof of compliance unless it is overwhelming in nature. The wise manager will list proofs in at least two categories, and in some cases, all four categories. The more ways a manager can show the agency is truly doing what they say they are doing, the better. The assessors will be looking to find compliance with the first few items they look at in the folder. Having additional proofs will never hurt, but not having enough is a common shortcoming. In most cases three or four proofs of compliance are sufficient. Most accreditation managers keep "shadow files." These files are separate folders containing additional proofs of compliance that, for one reason or another, are not what they want to show the team unless the team wants additional proofs.

In some cases folders can have no proofs that a policy has ever been employed. An example is the agency policy regarding line-of-duty deaths. Hopefully, no agency will need to use the direction that their policy on this topic demands. In cases where the policy is current, but no application has been made, a short memorandum from the CEO will serve as a proof that the agency will, if called upon to do so, employ the actions called for.

Similar to the above case, agencies going through the accreditation process often discover a need to either create or significantly re-write agency directives on an issue. The common term for new or re-written policy is "wet ink." Proofs of compliance with the new policy are non-existent or minimal. Again, a memorandum from the CEO explaining the situation will almost always be sufficient to show the department has made a "good faith effort" to prove what is required by the "wet ink" policy.

Waivers. Waivers can be granted on standards (and in some cases individual bullets.) The accreditation manager should submit any requests for waivers to VLEPSC staff at least one month prior to assessment. They should be submitted on the appropriate Commission form (see Sec. IX.) The usual criterion that dictates granting a waiver involves what the agency is responsible for. Most police departments do not provide courtroom security. Waivers for these standards are understandable for those agencies. In any case, and this is of the utmost importance, waivers approved by VLEPSC staff are still going to be reviewed by the on-site team. If the team believes the agency is responsible for whatever the standard calls for, the waiver can (and will) be voided. The original copy of the approved waiver should be placed in the appropriate standard file.

**Train agency personnel in policy changes.** Whenever appropriate, the manager should utilize the briefing schedules set up early on in the process. The manager may want to have other agency personnel present the changes (including the CEO or other high ranking officer) or may simply coordinate with shift commanders. The important point is that agency personnel know about newly adopted policy as soon as possible. Any new policy should include a training component for those it effects, and the manager should

remember that the assessment team may desire to interview agency rank and file on the particular issue addressed.

# IV. PREPARING FOR AND CONDUCTING THE MOCK ON-SITE

**Attend assessor training.** As with accreditation manager training, assessor training may not be available when the manager is available, however, the lessons learned in this training are very valuable. The focus of assessor training is to prepare individuals to think like an investigator. The standard can be compared to "the crime." The agency policy is a "suspect." The proofs of compliance are the "evidence." Assessors are trained to prove the policy matches the standard by using the proofs. Managers should attend this training as soon as it is available.

Manager observes/participates in a mock assessment. Accreditation managers depend on their peers to assist them in obtaining accredited status. When the agency has completed the self-assessment phase, it should arrange for a mock assessment. Mock assessments are not required, but, when conducted properly, are the most helpful strategy to prepare for actual Commission evaluation. Mock assessments are a tremendous classroom for the people who are assessing an agency. When asked to participate on a mock team, the accreditation manager is assisting his/her own agency at least as much as the agency being assessed. Whenever possible, accreditation managers should participate on the mock teams.

Conduct a thorough review of all folders. Setting up a final review of all agency folders prior to holding a mock assessment will give the manager one last opportunity to fill any gaps and correct last minute compliance issues. How thorough a review must be is dependent on many factors, however, giving a last check never hurts. The AM may use internal resources for this initial review, or do it themselves. In any case, every time the folders are scrutinized is a plus.

**Schedule and host a mock assessment.** The VLEPSC does not arrange for mock assessments, however staff personnel will assist identifying potential assessors from the Commission pool. The manager is responsible for organizing a team, making all arrangements for the team, what is to be looked at, and time scheduling. The more comprehensive the mock, the more likely the actual on-site will be successful. Mock assessments are not required, but are considered critical to a successful on-site assessment. Many agencies conduct internal mock assessments as a part of preparation for assessment.

Review mock team findings and amend folders as appropriate. The mock team will probably make suggestions as to compliance, format, or arrangements in their final report to the agency. They may make recommendations in all of these areas and others, too! The manager must not take the teams recommendations personally. The entire mock team format is designed to make life difficult now so that it will be easier when the true test comes. The manager should review all mock team comments and weigh the relevance of each item. In one case, additional proofs may be suggested for a particular folder. In another case, re-wording may be suggested. In rare cases, a complete rewriting of policy may be recommended. The agency has the option of accepting or not accepting the mock team recommendations. The Commission does not consider mock team findings when determining accredited status. One strategy on contested items may be to contact several other managers and/or assessors prior to making any changes suggested by the mock team. When appropriate, make the changes.

**Retrain employees.** Whenever a substantive change in policy is made, the re-training of affected personnel is necessary. Document your re-training.

**Make decision as to conducting a second mock assessment.** Mock assessments are relatively inexpensive and provide the agency with a professional evaluation without risk. Some agencies have been known to have more than two mock assessments prior to the initial full-fledged assessment. Two mocks are recommended for all agencies prior to their initial evaluation by the Commission team.

### V. THE COMMISSION ON-SITE ASSESSMENT

Contact Commission staff. When the agency believes it is prepared for the Commission on-site assessment, the first step is to contact the Commission staff and decide on the dates of the visit. The Commission will need a minimum of one month lead-time to arrange for a team. Remember, the assessors must make personal and professional arrangements in order to come to your department. Your professional treatment of the team starts by allowing ample time for these arrangements to be made. The Commission staff will offer several time frames, with almost every assessment starting with the team arriving on Sunday afternoon and finishing up by Wednesday afternoon.

The assessor selection list. The Commission staff will submit to the agency an Assessor Selection List (ASL) containing the names and departments for ten potential assessment team members. The agency has the option, but not obligation, of striking up to three names off the list. The CEO and the accreditation manager should conduct the review of the ASL. The Commission will not question the striking of a name. The reviewed list with any strikes must then be forwarded back to the Commission for team selection. The Commission will make every effort to ensure a balanced team is formed. Team leaders will normally be from like-size agencies; however, the Commission staff will not necessarily select the team based upon agency type. The agency will be notified of the final team composition as soon as possible.

**On-site protocol.** The accreditation manager has now reached the critical stage of the process, the actual site visit. Preparation for the team should be a well-orchestrated and efficient procedure. The following list does not represent all of the preparations the manager may arrange, but is fairly comprehensive.

#### **PRIOR TO ON-SITE:**

- Send the Commission staff a copy of the Agency Profile form (see Sec IX.) and a copy of any waivers.
- Make a personal phone call to team members about two weeks prior to visit.
- Send an "Information Package" to each member containing a letter of welcome from the CEO, a map to the hotel, pertinent phone numbers (including the managers home number,) an explanation of meal arrangements, a proposed itinerary, and information on the jurisdiction such as history, demographics, etc.
- Discuss arrangements with the team leader as soon as possible. Arrange for the best possible accommodations. Individual rooms are a must. Check with team members for special considerations such as dietary restrictions, smoking/non-smoking preferences, or disabled access.
- Lodging should be reasonably near the agency headquarters. Make the hotel accommodations well in advance of the arrival date and re-check on the status of the reservation a minimum of two days prior to arrival. The hotel should have restaurant facilities. Arrange with the hotel management for rooms away from main traffic corridors, and in an area of the hotel away from touring youth groups or other distractions. Make the hotel manager aware of the importance of the team. Advise the hotel manager that the team may want to secure their weapons in the hotel safe.
- Many agencies "personalize" the team member rooms. Items such as coffee mugs, ball caps, fruit baskets, etc. are appreciated, but certainly not required.
- Arranging meals should be discussed with the team leader. The agency will usually arrange a meal on Sunday evening after the team arrives. The CEO, accreditation manager and most often the agency command staff attend this dinner. Many agencies have also invited the city or county manager, mayor or other dignitaries to this function. The meal is an opportunity for the jurisdictional representatives and the agency staff to get to know the assessment team. All other meals should be arranged with the team conducting the assessment as the pivotal consideration. Most often, once the team starts the file reviews, they will want the meals brought into the assessment room. Managers should attempt to make every effort within reason to keep the team working on the files. Provide the team work area with an array of menus from local restaurants, and arrange for pick-up of the food when necessary.
- If the agency arranges a "per diem" meal arrangement, the details should be very clearly explained with the team members. Most agencies have arranged for any meals eaten at the hotel restaurant to be charged to the respective rooms.

- An often-overlooked preparation for on-site evaluation involves preparing the custodial crew that cleans agency offices. The manager will want to brief the crew chief about the importance of agency appearance and when the team is due on site.
- While the team is on-site, the manager is on 24-hour call. The manager should avoid scheduling personal commitments while the assessment is being conducted.

#### WHILE ON-SITE

- The team will be in the jurisdiction for two or three days. The manager should have the itinerary arranged with the team leader as much as possible.
- The CEO or his designee and the accreditation manager should meet the team at the hotel prior to the Sunday evening meal. The agency may prefer to make this meal rather informal, however, the preassessment dinner should be treated as a professional part of the assessment. Business attire is highly recommended.
- Arrange for the static display and agency tour to be conducted early in the assessment. Keep in mind
  that these items are time intensive, and the sooner the team gets into the files, the faster the assessment
  goes.
- The static display and agency tour provides the team with many proofs of compliance by observation and interview. The static display is the organizing and displaying of those portable or driveable items the agency utilizes in conducting business. This is where the agency provides for inspection, for instance, a marked cruiser, complete with uniformed officer. The personnel you place at the static display can speed up your on-site a lot! Use your most knowledgeable and personable folks! They will be asked questions about whatever department component they are there to display. Examples of equipment commonly seen at static displays are: cruisers (marked and unmarked.) SWAT team vans and equipment, K-9, horses, crime scene vans, transportation vehicles, boats, and bicycles. A static display can provide the team with all they will need to verify compliance with appropriate standards. Some agencies have given the team a list of those standards that are at least partially complied with through the static display or agency tour. The manager should provide the team a list of personnel assigned to the static display. The agency tour should include the property room and communications component. These areas may take some time to inspect. The property room personnel will likely be asked a number of questions and also asked to pull items under agency care. Communications personnel may be asked to follow a request for service through their system. In smaller agencies, the agency tour may involve only one building, but in larger departments coordination between AM and team leader will determine which district stations or heliports will be looked at! Arrangements for the static display are at agency discretion, however, if the agency is arranging an outdoor display, it is prudent to also arrange an alternate indoor site.
- The actual assessment room is a critical area. The manager should insure that it is comfortable, quiet, well lit and ventilated, clean and effectively supplied. The accreditation files should be easily accessible, and all agency procedure or operational manuals available. Easy access to rest rooms and comfortable chairs are examples of making this an environment that is conducive to work. Supplies such as coffee, soft drinks and water, snacks, fruit, etc. should be available. If the agency is automated, a workstation should be set up in the room. A copy machine and telephone should also be available.
- The team leader will be the contact person for the team, and discussions regarding compliance issues should be moderated by him/her. The manager will be expected to be available to discuss issues anytime the team is working. As many staff as necessary should assist the manager. More than one assessor may need information at any given time, so available help for the manager should be arranged, if not assigned. Many agencies have assigned one officer/deputy for each assessor.
- Members of the team will want to attend roll calls, ride along with officers, and/or interview members of the agency not scheduled for interview. This means the entire agency needs to be prepared for these possibilities. The team is trained to weigh all responses to queries, even when they happen upon the agency grouch! The manager should arrange to attend roll calls prior to the assessment and brief the rank and file on whom is coming and what to expect.
- Unless appealed to the executive board, the assessment team has the final say on waived standards.

#### **POST-ASSESSMENT**

- The team will conduct an exit interview with the CEO and the manager prior to departure. At this meeting, the agency will be advised of the final recommendation the team will give the executive board. If the team finds the agency in compliance with all applicable standards, the team leader will inform the CEO that the agency will be recommended for accredited status. If the agency fell short in some area, the team leader can grant up to a sixty (60) day extension. The team leader and the manager will make arrangements for the agency to prove compliance to the team leader during this period.
- If there are disputed compliance issues, the agency has the option of presenting their case to the executive board. The manager and CEO should appear before the board at the next scheduled meeting and present their interpretation of the issue. The board will rule on the item, and, if this issue is the deciding factor as to total compliance, will either grant or deny accredited status at that time.

#### VI. EXECUTIVE BOARD REVIEW

**Invitation to appear.** The VLEPSC will advise the agency of the date and time of the next executive board meeting. The CEO and the manager will be invited to appear before the board to hear the final report delivered by the team leader. The CEO and manager will also be given an opportunity to speak on the accreditation program in general, and the assessment in particular. Board members will have questions for the agency representatives regarding particular phases of the process, and any troublesome areas the agency experienced. This open forum is highlighted by the vote on accredited status.

**Length of accredited status.** The VLEPSC period for accredited status is four years. In the fourth year, the agency must arrange for an on-site team visit using the same guidelines as with the original assessment. See section VIII. below.

**The accreditation fee.** After being approved by the executive board, the agency will receive an invoice for \$100.00 from the board Treasurer. The agency should submit this fee to the Treasurer within 30 days.

#### VII. NOW WHAT?

**Use of Accredited Agency seal.** The VLEPSC staff will provide the manager with camera ready copies of the official "Accredited Agency" seal. This logo can be displayed on agency vehicles, letterhead, web pages or any other official presentation. The agency makes all arrangements for the production and delivery of agency accreditation seals. Within reason, any color combination that matches the item the seal is placed on is acceptable. Any change in the seal format should be discussed with program staff first.

Certificate presentation. Perhaps the most satisfying moment for the CEO comes with the presentation of the certificate of accredited status. Presentations are most often done at city, county or town council meetings, but can be held in almost any venue. The manager should contact program staff at least one month prior to the event with the date, time and place of the presentation. The manager should also send invitations to all members of the VLEPSC board, VLEPSC staff, and the assessment team members. The AM may contact VLEPSC staff for the necessary information to accomplish this. Some agencies also invite mock team members and other individuals who have assisted them in obtaining the first stage of accreditation. The format for the presentation is quite simple: the CEO introduces a staff member who then speaks for about 5 minutes. The speaker then introduces members of the VLEPSC Executive Board who are present, and the ranking member of the board, most often the chair, does the actual presentation of the accredited agency certificate. This is followed by remarks from the CEO and any others he/she desires.

**Annual reports.** The VLEPSC requires annual reports on accreditation activities. The annual report form is provided by program staff and may call for copies of several quarterly and annual agency reports addressed by particular standards. The agency should return the completed report within 30 days of the agency anniversary date.

**Maintenance of files.** The maintenance of accreditation files is an ongoing endeavor. The accreditation manager should plan on reviewing each file on a regular basis, and constantly be on the watch for proofs of compliance that can be used when the VLEPSC sends the re-accreditation team to the agency in four years. The agency should never be without an accreditation manager. By designating an accreditation manager, the CEO is helping to ensure that all new policies and procedures adopted by the department are in compliance with applicable VLEPSC standards. This in turn makes re-accreditation much easier.

**Manager training.** Managers are urged to take advantage of all training offered through the VLEPSC and the Virginia Law Enforcement Accreditation Coalition (VALEAC.) Membership in VALEAC is essential to accreditation managers at any phase of the process.

## VIII. <u>RE-ACCREDITATION</u>

The files. Maintaining accreditation files, especially immediately after obtaining accredited or re-accredited status, is of the utmost importance for the accreditation manager and the agency. The manager may need a break from the action for some time after leading the agency through the process, however, they are cautioned that leaving the files to themselves is a huge mistake! The four-year accreditation term is actually shortened by the preparation time for re-accreditation. In most basic terms, the process for re-accreditation is similar but not exactly like the initial accreditation.

The re-accreditation period starts the day the agency is granted accredited status by the Executive Board. Success in the re-accreditation process can rely on how well the manager has developed internal processes that require accumulating information for the initial accreditation. The agency should have a system in place that reminds staff that proofs of continued compliance will be required during the accreditation term. The manager should continue to occasionally drop in on roll calls and provide briefings at command staff meetings. Line supervisors should be on the watch for incident reports and other documentation that the manager may be able to use as a proof of compliance. If the mindset of the agency is established early in the process, the managers job is greatly facilitated.

Of great interest to managers is the answer to the question "how much am I suppose to place in the files for re-accreditation?" The answer is actually quite simple: put enough in the folder to prove your department has done what the standard calls over the four-year accreditation term. Although not a hard and fast rule, compiling one or two proofs of compliance per year is, in most cases sufficient. Remember, the re-assessment team, like their predecessors, will review the folder until they believe compliance has been proven. They will then move on to the next folder. Accumulating numerous items for year one, but none for year three, will probably not get the job done! How the files are organized and the ease with which the re-accreditation on-site team can navigate through them will have a huge bearing on how well the on-site goes! As with the initial assessment, in those years where the agency had no opportunity to employ a particular policy as it relates to a standard, a memorandum signed by the CEO to that effect will be sufficient as continued compliance.

Annual reports. Every year, approximately one month prior to the month of initial accreditation, the agency will receive either electronically or in hard copy, an annual report form. In most cases the form simply calls for the agency CEO to verify that his/her department is continuing to maintain accredited status and compliance with the standards. In some cases the agency may be asked to supply VLEPSC staff with additional proofs of compliance on a small number of standards. The form also asks for a brief synopsis of any litigation bought against the agency where accreditation or policy is a major issue. This synopsis is voluntary and its purpose is to assist staff in determining areas where standards could be strengthened or adopted. This form should be completed and returned in a prompt manner.

**Re-accreditation on-site assessments.** The re-accreditation on-site is very much like the initial on-site assessment. The major change in format is that there is no assessor selection list. The Commission staff will name a team and notify the agency of the members. The actual on-site is conducted in the same manner as the initial assessment. The static display and agency tours are opportunities for the new team to interview and observe compliance and are a necessity.

This manual is produced with the intention of assisting accreditation managers in the accreditation process. Although most of the program areas are addressed, there may be additional questions that either program staff or fellow managers can clarify. It is important to maintain contact with individuals involved in all stages of the program, and to assist other managers in their activities. It is strongly recommended that all accreditation managers become and remain affiliated with the Virginia Law Enforcement Accreditation Coalition and attend Coalition meetings as often as possible. VA-LEAC has a web page for members.

For further information on the Virginia Law Enforcement Professional Standards Commission, the Virginia Law Enforcement Accreditation Coalition, or accreditation topics in general, contact the Commission staff at <a href="https://www.dcjs.state.va.us/accred">www.dcjs.state.va.us/accred</a> or at (804)786-7811.